Office use only	Trainee ID:	Scholarly Project number:		Submission date:
				The Royal Australian & New Zealand College of Psychiatrists
	Schol	arly Project subr	nission for	'n
To be complete	ed by trainees submitt	ng a Scholarly Project unde	r the Fellowship F	Regulations 2012.
Please submit	this form to the RAN	ZCP's examination team:	scholarly@ranzc	p.org
RANZCP ID				
Trainee name				
Contact addre	ess* (please indicate)	□ Personal	□ Business	
Mobile phone*	*			
Email address				
*Your details will I	be updated on the RANZC	P database if they don't match the	existing records.	
	tails <i>(if applicable)</i>			
RANZCP ID				
Trainee name				
Contact addre	ess* (please indicate)	□ Personal	□ Business	
Mobile phone*				
Email address				
Co-authorship		ttached		
[†] Trainees who contributions t		y Project must submit a sigr	ed joint statemen	t detailing their respective
Co-researche	er details <i>(if applical</i>	le)		
Name				
Position/title, o	organisation			
Mobile phone				
Email address	s			
Co-research s	statement [‡]	ttached		

[‡]Trainees who work with a researcher from another discipline (co-research) must submit a signed statement from the principal researcher detailing the trainee's contribution to the project.

Office use only Tra	ainee ID:	Scholarly Project number:	Submission date:
Office use onlv Tra	ainee ID:	Scholarly Project number:	Submission date:

PROJECT INFORMATION

Project title			
Project type (please indicate)			
□ Quality assurance project or	clinical audit	□ Literature review	
□ Qualitative or quantitative re	search	□ Case series	
□ Other (please specify)			
Word count*		□ Evidence of intention to attached.	proceed to higher degree
*A literature review linked to a word limit.	higher degree (PhD, Ma	sters) is considered an exce	ption to the 3000–5000
Submission number	□ First	□ Second	Third

SCHOLARLY PROJECT SUPERVISOR DECLARATION

I certify that:

- I supervised the trainee(s) listed above for this Scholarly Project
- to the best of my knowledge, the trainee(s) is/are the major author(s) of the Scholarly Project (as defined in the Scholarly Project Policy and Procedure).

Principal supervisor name (print)	
RANZCP ID	
Signature	 Date
Position/title, organisation	
Mobile phone	
Email address	
Co-supervisor name	
(if applicable)	
(If applicable) RANZCP ID (if applicable)	
	 Date
RANZCP ID (if applicable)	
RANZCP ID <i>(if applicable)</i> Signature	

Office use only	Trainee ID:	Scholarly Project number:	Submission date:
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PAYMENT DETAILS

The Scholarly Project submission fee must accompany this form. Payment can be made by completing the details below. *New Zealand candidates, please use EFT for transactions as credit card payments are temporarily restricted to Australian candidates.*

Electronic funds tra	nsfer (EFT)	Date of transfer		
Australian EFT payments to:		New Zealand EFT payments to:		
Bank	Westpac Banking Corporation	Bank	Westpac NZ	
BSB	033178	Account No	03-0207-0285242-000	
Account No	801076	Account name	RANZCP	
Account name	RANZCP	Payment description	[must include surname and SProject]	
Payment description	[must include surname and SProject]	Reference number		
Reference number				
Credit card payment	□ Visa □ MasterCard			
Card no		Expiry date		
Signature				
□ Cheque (made payable to RANZCP)				
Amount \$			□ NZ	
F	10 i 10 i i i i i i i i i i i i i i i i			

Fees will be deducted within 10 working days of receipt of application. Please ensure that funds are available during this time.

Please note: this submission form becomes an invoice once paid. RANZCP examination fees are not subject to GST.

Co-author payment details (if applicable)

The Scholarly Project submission fee must accompany this form. Payment can be made by completing the details below.

Electronic funds tra	nsfer (EFT)	Date of transfer	
Australian EFT payments to:		New Zealand EFT payments to:	
Bank	Westpac Banking Corporation	Bank	Westpac NZ
BSB	033178	Account No	03-0207-0285242-000
Account No	801076	Account name	RANZCP
Account name	RANZCP	Payment description	[must include surname and SProject]
Payment description	[must include surname and SProject]	Reference number	
Reference number			
Credit card payment	□ Visa □ MasterCard		
Card no		Expiry date	
Signature			
□ Cheque (made payable to RANZCP)			
Amount \$			□ NZ

Fees will be deducted within 10 working days of receipt of application. Please ensure that funds are available during this time.

Please note: this submission form becomes an invoice once paid. RANZCP examination fees are not subject to GST.

Office use only Trainee ID: Scholarly Project number: Submission date:		Office use only	Trainee ID:	Scholarly Project number:	Submission date:
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CHECKLIST

I/We have:

- □ proofread the project
- □ de-identified the project as appropriate
- □ attached a signed statement acknowledging any assistance provided by the supervisor/ co-supervisor or any third party (if applicable)
- □ attached my/our current medical registration
- □ attached a joint signed statement detailing our respective contributions to the project (if co-authors)
- □ attached a signed statement from the principal researcher detailing my contribution to the project (if co-research)
- □ attached evidence of intention to proceed to higher degree (if applicable)
- □ all supporting documents including this form attached as a single pdf
- □ attached soft copy of the project as a word document

TRAINEE DECLARATION

I/We hereby certify that:

- I am a major author of this Scholarly Project (as defined in the policy and procedure)
- I have appropriately acknowledged any assistance provided by others (signed statement attached)
- I understand that this project may be checked for plagiarism using software or other means. *Please select applicable:*

□ This project is my/our own independent undertaking.

□ This project is part of a major research project.

Trainee signature		Date
Co-author (if applicab	le)	
Trainee signature		Date

Please Note: The College recognises that the copyright of the Scholarly Project resides with the trainee, however any projects that are published should contain the acknowledgment that "The project was carried out as a part of the RANZCP Fellowship requirement".

Office use only	
Scholarly Project proposal	
Date submitted (to BTC)	
Date received from BTC	
Co-author proposal	□ Not applicable
Date submitted (to BTC)	
Date received from BTC	
Type of Proposal Confirmed	
Title of the Submission checked against the Proposal	

Scholarly Project Soft Copy Submission

When submitting your Scholarly Project, you are to email your submission to <u>scholarly@ranzcp.org</u>

As a result of these changes, you are required to submit two (2) separate files:

- 1) Submit your Scholarly Project submission form and all other required documentation indicated in the <u>Scholarly Project Submission</u> form. **This is to be one (1) PDF.**
- 2) Submit only one (1) soft copy of your Scholarly Project. This is to be one (1) word document.
- 3) The naming convention for each file is to follow this format:

RANZCP ID_FAMILY NAME, First Name_Forms_ date of submission.

RANZCP ID_FAMILY NAME, First Name_ ScholarlyProject_date of submission.

For example

12345_KENT, Clarke_Forms_4 March 2022

12345_KENT, Clarke_ScholarlyProject_4 March 2022

- 4) Please include the word count on the first page of your soft copy submission.
- 5) We also ask that you check that the file size is below 25 MB prior to emailing and that attachments are compressed using appropriate software like zip to reduce the file size.
- 6) Files containing images should not be of high resolution unless required.
- 7) The attachments should be scanned using appropriate Antivirus software
- 8) Email your submission by the published closing date as per the RANZCP's Examination Timetable.
- **9)** The closing time for the acceptance of submissions is 5:00pm AEST/AEDT Melbourne time. Trainees are advised not to wait until the last minute to email their submission, as should there be a queue at the closing time, your submission may not be received until after 5:00pm AEST/AEDT